

JIS CODE: PAR

STATE OF MICHIGAN PROBATE COURT KALAMAZOO COUNTY	PROOF OF RESTRICTED ACCOUNT – NO ASSETS MCR 5.409 (C)(4)	CY
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In the matter of \_\_\_\_\_, Minor

**This form must be completed and filed with the Court within 14 days of the conservator's qualification.**

It appearing that a conservatorship was established for the above named minor ordering that all assets be placed in restricted accounts. Pursuant to MCR 5.409 (C)(4), I am required to file Proof of Restricted Account with the Probate Court.

**As of this date, I have not received any assets for the minor.**

Within five (5) days after funds are received, I will file with the Probate Court, pursuant to MCR 5.409 (C)(4), the form **Verification of Funds on Deposit.**

I declare under the penalties of perjury that this Proof of Restricted Account – No Assets has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney signature

\_\_\_\_\_  
Conservator signature

\_\_\_\_\_  
Attorney name (type or print)

\_\_\_\_\_  
Conservator name (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Telephone No.

Proof of Restricted Account – No Assets – MCR 5.409 (C)(4) (Revised: 1-2007)

<b>STATE OF MICHIGAN PROBATE COURT KALAMAZOO COUNTY</b>	<b>Verification of Funds on Deposit – No Assets MCR 5.409 (C)(4)</b>	<b>CY</b>
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In the matter of \_\_\_\_\_, Minor

It appearing that a conservatorship was established for the above named minor ordering that all assets be placed in restricted accounts. Annually, I am required to file with the Probate Court proof of restricted account using the form - Verification of Funds on Deposit.

**As of this date, I have not received any assets for the minor.**

I agree to file this statement regarding assets annually with the court until funds are received or the minor turns 18.

Within five (5) days after funds are received, I will file with the Probate Court, pursuant to MCR 5.409 (C)(4), the form **Verification of Funds on Deposit and an Amended Inventory.**

I declare under the penalties of perjury that this Verification of Funds on Deposit – No Assets has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney signature

\_\_\_\_\_  
Conservator signature

\_\_\_\_\_  
Attorney name (type or print)

\_\_\_\_\_  
Conservator name (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Telephone No.

Verification of Funds on Deposit – No Assets - MCR 5.409 (C)(4) (Revised 1-2007)